It would require Members to pay the full charter cost when using corporate jets for official travel and to disclose relevant costs in the CONGRESSIONAL RECORD. Literally, the piece of the legislation we are going to consider tomorrow, the only change, is corporate travel; in other words, when a Member is using the private plane provided by a lobbyist. Sometimes, you know, a Member needs to get somewhere quicker than commercial travel allows them to. The proposal tomorrow only prohibits the lobbyists from traveling with the Member on the plane.

They can still do it exactly as they do it now, but they cannot go with the Member. That is the accountability that is provided for in this bill. It is a joke.

You know the American people are not going to buy it. You know, the finger in the dike for the next 6 months and hoping that that gets them through. I mean, I am hopeful that that does not work. It appears that the American people finally get it and that they will be behind us in moving this country in a new direction. Sorry I took so long. That has been growing inside me.

Mr. DELAHUNT. Thank you for that exposition. I just want to return to the original theme. We are connecting the dots, because I think really what is required is an openness that heretofore has been missing. And I honestly believe that the dreadfully low polling numbers for the institution would be changed dramatically.

## □ 2030

In other words, rather than 23 percent of the American people approving the performance of Congress, 23 percent as opposed to two-thirds of the American people disapproving of the performance of Congress, can only change with transparency and aggressive oversight.

By aggressive oversight, we don't simply mean partisanship and partisan attacks. We mean putting it all out on the table, letting men like these three generals and many others. I think of the former AID director, the Agency for International Development, who is currently at Georgetown University doing a professorship, who recently made a statement saying that the reconstruction effort in Iraq is plagued by incompetence and turf battles within the administration. It would be healthy.

It would be healthy for us, for the institution, because you said something earlier about the confidence of the American people. If we are going to change those poll numbers, we have to come together, assume our responsibilities and become aggressive about holding the executive branch accountable, holding ourselves accountable, as you just pointed out, and reviewing the performance of the judiciary.

We could debate about it, but let the American people hear directly, without the filter of partisanship, whether it be Democratic or Republican. Let them hear directly as to the observations of those that are involved in whatever the issue is.

I mean, I would suggest that in the aftermath of the passage of the so-called prescription drug benefit program, that aggressive oversight would have entailed bringing before the appropriate committee of Congress those who are involved in hiding from the United States House of Representatives and the U.S. Senate what the estimates were in the administration of the cost of that particular plan.

We should have all been outraged. We should have demanded to hear from the participants, but we didn't. We failed, I would suggest. And know what we have today? We have the lowest rating, I believe, since I have been here, by the American people, according to a poll that I just saw before coming over here, of the performance of the United States Congress. We are a democracy. We have got to become institutionalist once more.

We have got to defend the prerogative of the Congress, whoever is in the White House.

I will tell you what I have learned, Ms. Wasserman Schultz, is that when one party controls all of the levers of power in a democracy, accountability just disappears. I am not saying that is peculiar to Republicans. Maybe it is innate just in human nature. We don't want to embarrass our President, if he is of the same party, but we have got to restore a sense of pride in the institution. That is not happening here today.

One hearing, one legitimate hearing on Iraq in 3 years? Meanwhile, thousands of military personnel have died, and we are spending close to \$1 trillion already, and more in the pipeline. It is not right. That is why the American people are losing confidence in the U.S. Congress.

Ms. WASSERMAN SCHULTZ. There are lots of reasons, Mr. Delahunt, some of the ones you outlined, but many more reasons why the American people are losing confidence in our ability to make sure that we respond to their concerns. Here are some key facts that I pulled together that just might explain why people are so frustrated, aside from the major issues that we have been outlining here tonight.

Just for example, median income, median family income has dropped every year of the Bush administration. Median wages have dropped 6 percent from 2000 to 2004 according to the Federal Reserve Board. A typical middle-class family, and this is the 30-something Working Group, and we just want to provide some highlights of the things that this generation is struggling to deal with, the typical middle-class family is working longer than in 2001 just to pay the bills.

Health care costs have skyrocketed, with a typical family paying \$632 more for health insurance, compared with

2000. The number of Americans without health insurance has increased by 6 million, while the number living in poverty has increased by 4.5 million since 2000. Gas prices are 62 percent higher than in 2001. Housing is the least affordable it has been in 14 years.

In my community alone, and I know your community is expensive as well, the average price of a house in south Florida is more than \$300,000. Now how is a young couple, just starting out, who wants to reach the ability to buy their first home, going to afford that?

Come on, I am not that far from having bought my first home with my husband. Trust me, if the prices were like that in south Florida when we first started out, there is no way. We would be living in a shack, which many people in America are continuing to struggle to even be able to afford.

College tuition. Let us continue down the path of what young people are struggling with. College tuition has gone up about 40 percent, even if you take inflation into account, according to the college board in 2005. The number of employees in an employer-sponsored retirement plan dropped by more than 2.7 million from 2000 to 2004. That is Congressional Research Service, our objective Congressional Research Service that cited that statistic.

About 3.7 million employees have lost employer-provided health insurance since 2000. The median household debt has climbed 34 percent, to \$55,300, from 2000 to 2004. The typical student graduates from college with about \$17,500 in debt. While wages and salaries are at a record low as a share of national income, corporate profits are at a 60-year high.

Finally, the last statistic that I was able to pull together, just to outline what the average working family is struggling through, Mr. Delahunt, is that the number of U.S. billionaires reached a record of 793, which is up 15 percent from last year. It is no wonder that the American people are fed up with us and fed up with the lack of outrage, with the lack of leadership, and that the polling numbers, when you rate the Congress, are just hitting rock bottom.

Mr. Delahunt, I have really enjoyed the opportunity to spend some time here with you tonight. The last couple of minutes we will pull up our 30-something Working Group Web site, which we encourage the Members and anybody who is interested in getting the charts that we have outlined here tonight. They can access that on www.housedemocrats.gov/30something.

Madam Speaker, with that, we want to thank the Democratic leader for the opportunity to speak to our Members tonight, and we yield back the balance of our time.

## BEST CHEAP THRILL

The SPEAKER pro tempore (Ms. Foxx). Under a previous order of the House, the gentleman from Minnesota

(Mr. Kennedy) is recognized for 5 min-

Mr. KENNEDY of Minnesota. Madam Speaker, in a story published today, entitled "Best Cheap Thrill: Crystal Meth," the Minneapolis/St. Paul City Pages sunk to a nearly incomprehensible low. In that story the newspaper, and I use that word loosely, had the amoral audacity to advocate for meth

Its editor. Steve Perry, then dared to try to justify such lunacy by saying the point of the item was that it is impossible to make entirely too much of the drug hype of the hour.

Drug hype of the hour? Such a statement shows a shocking ignorance of the facts and an unparalleled insensitivity to the thousands of Minnesotans of every age and walk of life who are struggling to rebuild their lives. They were shattered by this alleged, quote, best cheap thrill of the year.

Comparing the harrowing experience of meth addiction to a cheap thrill is an unconscionable act, and it is a disgusting act. The City Pages should immediately retract this filth and issue an apology to every Minnesotan who has been harmed or knows someone who has been harmed by this drug.

Better yet, Madam Speaker, maybe the editors should do as I did and visit a drug treatment facility to see just what devastating harm this can cause to people and their families. I did yesterday visit Teen Challenge and talked to 300 Minnesotans that are struggling with an addiction. These brave souls are trying to piece their lives back together, and they would have plenty to tell Mr. Perry and his associates about just how much the pursuit of, quote, cheap thrills, unquote, like meth cost them in their lives and the lives of their families and friends.

Mr. Speaker, I cannot comprehend the shameful lack of responsibility exhibited by the City Pages and hope its pleas of recklessness fall only on deaf ears.

I remind the children of Minnesota that meth is not a drug hype of the hour. It is a drug whose dangerous addictiveness knows no bounds and must at all costs be avoided.

## MEDICARE PART D

The SPEAKER pro tempore. Under the Speaker's announced policy of January 4, 2005, the gentleman from Georgia (Mr. GINGREY) is recognized for 60 minutes as the designee of the majority leader.

Mr. GINGREY. Madam Speaker, thank you so much. It is great to be here again tonight talking to my colleagues as part of the Republican health care public affairs team, and I am pleased that a number of my colleagues will be joining me, hopefully, during the hour, and we will be hearing from them later.

Madam Speaker, I ask this question. If there was a way to save more than \$1,000 a year on your heating bill or

your food costs or car payments, you would want to know about it, right? I know that my colleagues, I think on both sides of the aisle, would definitely want to know. Well, seniors are saving an average of \$1,100 a year on prescription drug costs with the Medicare Part D prescription drug program, \$3,700 a year for those low-income seniors who qualify for supplemental help. For many seniors, Medicare Part D marks the first time that they have been able to afford the medications that they need to stay well. For many more, Medicare Part D means they will not have to choose between their medications and other necessities like food and housing costs.

Madam Speaker, I wanted to start out by going through a couple of these slides and pointing out some of the statistics that really just literally jump off the page at you. More than 30 million seniors now have coverage under Medicare Part D. These are our latest statistics. More than 30 million. There are about 43 million Medicare beneficiaries, mostly because of age 65, and maybe 6 million of those because of a disability at a young age.

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But when you look at here, and we have not even reached at that magic date yet in this first year, that more than 30 million now have coverage, it is an amazing success story.

And continuing that success story, pharmacists in this country are filling 3 million Medicare part D prescriptions a day. That is 3 million times a day that seniors are saving with prescription drug coverage. And many of these seniors were paying sticker price until they finally had the opportunity to save under this great addition to the Medicare program.

Seniors, as I said, are saving an average of \$1.100 a month. And \$1.100 a month is a great number and a great benefit in itself, and this is on average, but low-income seniors, of course, are paying now, under this program, \$1 for a generic drug and up to \$5 for brand name as a copay, and that is it. That is it. Let's say you are on 5 prescription drugs, and they are filled on a monthly basis, usually a 30-day supply. That is \$5 a month, or \$60 a year.

And I don't want you to just take Congressman Dr. GINGREY'S word for that, my colleagues. We have some stories, some anecdotes, to share with you, some actual patients that want to tell you more about that in these following charts. In fact, some of those very seniors are going to be up here on the Hill tomorrow for a press conference, and we will hear it directly from them. I look forward to that, and I hope many of my colleagues will have an opportunity to attend that press conference.

Well, the newspapers, sometimes we wonder if they give the facts as we know them. I want to share with you on this next slide some of the newspapers and what they are finally saying

now that we are about 3 weeks away from May 15. And of course we all know that this bill was passed by this Congress, actually the 108th Congress, in November of 2003, and we have gone through the transition program with the Medicare prescription discount cards, where seniors were definitely saving money. Indeed, the low-income seniors got a \$600 credit each of the 2 years. It wasn't quite 2 years, but for each of the 12-month increments they got a \$600 credit, and then as we rolled into the actual insurance program January 1 of this year.

But listen to what the Washington Times is saying now. "Even with the myriad prescription drug plans open to beneficiaries, seniors are not overburdened by choice, two recent surveys demonstrate. The surveys, sponsored by America's health insurance plans, show that of seniors who signed up for the Medicare drug benefit, the vast majority, 84 percent, had no difficulty, no difficulty, enrolling. And finding the right plan is worth the effort of shopping around, two-thirds said. For those who were automatically enrolled. 90 percent had little difficulty receiving their prescription drugs."

The ones that were automatically enrolled, of course, were those seniors that we refer to as either dual-eligible, in other words, they are on Medicare and the State Medicaid because of their low-income situation, or their income is maybe not low enough to qualify for the Medicaid, but the State helps them pay their deductibles and copay under Medicare. All of those seniors, if they didn't sign up, they were automatically enrolled.

Now, listen to what The New York Times says, and this New York Times is not the bastion of conservatism, of course, as we know. "Many seniors are clearly saving money on drug purchases. Complaints and call waiting times are diminishing, and many previously uninsured patients are clearly saving money on drug purchases."
That was in an editorial in The New York Times on April 3, so just a couple or 3 weeks ago.

Well, I said at the outset. Madam Speaker, that I would be joined by some of my colleagues on the Republican health care public affairs team. We have a great group of Members who have expertise not only on this issue, but a lot of issues that we are taking the leadership on in regard to health care in this country, whether we are talking about leveling the playing field in regard to civil justice, so-called medical tort system; or whether we are talking about passing, as we have done so many times under this Republican leadership in this body, something that is referred to as association health plans, which allow small companies who really cannot afford to purchase health insurance for their employees when their numbers are small, 5, 10, 15 employees, to come together in a group and enjoy that benefit of purchasing a policy that is affordable to their employees, health savings accounts; or